

County: Chippewa
HANNAH M RUTLEDGE HOME/AGING
300 BRIDGEWATER AVENUE

Facility ID: 4030

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CHIPPEWA FALLS 54729 Phone: (715) 723-5566
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 83
Total Licensed Bed Capacity (12/31/01): 96
Number of Residents on 12/31/01: 83

Ownership: Non-Profit Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? No
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 85

| Services Provided to Non-Residents | | Age, Sex, and Primary Diagnosis of Residents (12/31/01) | | | | Length of Stay (12/31/01) | | % |
|--|-----|---|-------|------------|-------|---------------------------------|--|-------|
| Home Health Care | No | Primary Diagnosis | % | Age Groups | % | Less Than 1 Year | | 31.3 |
| Supp. Home Care-Personal Care | No | | | | | 1 - 4 Years | | 38.6 |
| Supp. Home Care-Household Services | No | Developmental Disabilities | 0.0 | Under 65 | 1.2 | More Than 4 Years | | 30.1 |
| Day Services | No | Mental Illness (Org./Psy) | 20.5 | 65 - 74 | 3.6 | | | ----- |
| Respite Care | No | Mental Illness (Other) | 26.5 | 75 - 84 | 26.5 | | | 100.0 |
| Adult Day Care | No | Alcohol & Other Drug Abuse | 0.0 | 85 - 94 | 54.2 | ***** | | |
| Adult Day Health Care | No | Para-, Quadra-, Hemiplegic | 1.2 | 95 & Over | 14.5 | Full-Time Equivalent | | |
| Congregate Meals | No | Cancer | 0.0 | | ----- | Nursing Staff per 100 Residents | | |
| Home Delivered Meals | Yes | Fractures | 0.0 | | 100.0 | (12/31/01) | | |
| Other Meals | No | Cardiovascular | 14.5 | 65 & Over | 98.8 | ----- | | |
| Transportation | No | Cerebrovascular | 7.2 | | ----- | RNs | | 16.8 |
| Referral Service | No | Diabetes | 6.0 | Sex | % | LPNs | | 7.2 |
| Other Services | No | Respiratory | 9.6 | | ----- | Nursing Assistants, | | |
| Provide Day Programming for Mentally Ill | No | Other Medical Conditions | 14.5 | Male | 21.7 | Aides, & Orderlies | | |
| Provide Day Programming for Developmentally Disabled | No | | 100.0 | Female | 78.3 | | | 61.4 |
| | | | | | ----- | | | 100.0 |

Method of Reimbursement

| Level of Care | Medicare (Title 18) | | | Medicaid (Title 19) | | | Other | | | Private Pay | | | Family Care | | | Managed Care | | | Total Residents | % of All |
|----------------------|---------------------|-----|---------------|---------------------|-------|---------------|-------|-----|---------------|-------------|-------|---------------|-------------|-----|---------------|--------------|-----|---------------|-----------------|----------|
| | No. | % | Per Diem (\$) | No. | % | Per Diem (\$) | No. | % | Per Diem (\$) | No. | % | Per Diem (\$) | No. | % | Per Diem (\$) | No. | % | Per Diem (\$) | | |
| Int. Skilled Care | 0 | 0.0 | 0 | 3 | 6.0 | 115 | 0 | 0.0 | 0 | 2 | 6.1 | 115 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 5 | 6.0 |
| Skilled Care | 0 | 0.0 | 0 | 41 | 82.0 | 97 | 0 | 0.0 | 0 | 28 | 84.8 | 101 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 69 | 83.1 |
| Intermediate | --- | --- | --- | 6 | 12.0 | 80 | 0 | 0.0 | 0 | 3 | 9.1 | 96 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 9 | 10.8 |
| Limited Care | --- | --- | --- | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Personal Care | --- | --- | --- | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Residential Care | --- | --- | --- | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Dev. Disabled | --- | --- | --- | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Traumatic Brain Inj | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Ventilator-Dependent | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Total | 0 | 0.0 | | 50 | 100.0 | | 0 | 0.0 | | 33 | 100.0 | | 0 | 0.0 | | 0 | 0.0 | | 83 | 100.0 |

| ***** | | | | | | |
|--|------|--|-------------|--|---------------------|---------------------------|
| Admissions, Discharges, and Deaths During Reporting Period | | Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01 | | | | |
| | | | | % Needing Assistance of One Or Two Staff | % Totally Dependent | Total Number of Residents |
| Percent Admissions from | | Activities of | % | | | |
| Private Home/No Home Health | 33.3 | Daily Living (ADL) | Independent | | | |
| Private Home/With Home Health | 7.7 | Bathing | 2.4 | 14.5 | 83.1 | 83 |
| Other Nursing Homes | 25.6 | Dressing | 16.9 | 43.4 | 39.8 | 83 |
| Acute Care Hospitals | 28.2 | Transferring | 34.9 | 30.1 | 34.9 | 83 |
| Psych. Hosp. -MR/DD Facilities | 0.0 | Toilet Use | 34.9 | 31.3 | 33.7 | 83 |
| Rehabilitation Hospitals | 0.0 | Eating | 74.7 | 20.5 | 4.8 | 83 |
| Other Locations | 5.1 | ***** | | | | |
| Total Number of Admissions | 39 | Continence | % | Special Treatments | | % |
| Percent Discharges To: | | Indwelling Or External Catheter | 0.0 | Receiving Respiratory Care | | 14.5 |
| Private Home/No Home Health | 0.0 | Occ/Freq. Incontinent of Bladder | 67.5 | Receiving Tracheostomy Care | | 0.0 |
| Private Home/With Home Health | 2.9 | Occ/Freq. Incontinent of Bowel | 14.5 | Receiving Suctioning | | 0.0 |
| Other Nursing Homes | 2.9 | | | Receiving Ostomy Care | | 0.0 |
| Acute Care Hospitals | 0.0 | Mobility | | Receiving Tube Feeding | | 0.0 |
| Psych. Hosp. -MR/DD Facilities | 0.0 | Physically Restrained | 6.0 | Receiving Mechanically Altered Diets | | 18.1 |
| Rehabilitation Hospitals | 0.0 | | | | | |
| Other Locations | 11.4 | Skin Care | | Other Resident Characteristics | | |
| Deaths | 82.9 | With Pressure Sores | 2.4 | Have Advance Directives | | 97.6 |
| Total Number of Discharges (Including Deaths) | 35 | With Rashes | 1.2 | Medications | | |
| | | | | Receiving Psychoactive Drugs | | 62.7 |

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

| | This Facility % | Ownership: Nonprofit Peer Group Ratio | Bed Size: 50-99 Peer Group Ratio | Licensure: Skilled Peer Group Ratio | All Facilities Peer Group Ratio | | | | |
|--|--------------------|--|-------------------------------------|--|------------------------------------|-------|------|-------|------|
| Occupancy Rate: Average Daily Census/Licensed Beds | 88.1 | 89.4 | 0.99 | 85.1 | 1.04 | 84.3 | 1.04 | 84.6 | 1.04 |
| Current Residents from In-County | 80.7 | 82.7 | 0.98 | 80.0 | 1.01 | 82.7 | 0.98 | 77.0 | 1.05 |
| Admissions from In-County, Still Residing | 61.5 | 25.4 | 2.42 | 20.9 | 2.94 | 21.6 | 2.85 | 20.8 | 2.96 |
| Admissions/Average Daily Census | 45.9 | 117.0 | 0.39 | 144.6 | 0.32 | 137.9 | 0.33 | 128.9 | 0.36 |
| Discharges/Average Daily Census | 41.2 | 116.8 | 0.35 | 144.8 | 0.28 | 139.0 | 0.30 | 130.0 | 0.32 |
| Discharges To Private Residence/Average Daily Census | 1.2 | 42.1 | 0.03 | 60.4 | 0.02 | 55.2 | 0.02 | 52.8 | 0.02 |
| Residents Receiving Skilled Care | 89.2 | 93.4 | 0.95 | 90.5 | 0.99 | 91.8 | 0.97 | 85.3 | 1.05 |
| Residents Aged 65 and Older | 98.8 | 96.2 | 1.03 | 94.7 | 1.04 | 92.5 | 1.07 | 87.5 | 1.13 |
| Title 19 (Medicaid) Funded Residents | 60.2 | 57.0 | 1.06 | 58.0 | 1.04 | 64.3 | 0.94 | 68.7 | 0.88 |
| Private Pay Funded Residents | 39.8 | 35.6 | 1.12 | 32.0 | 1.24 | 25.6 | 1.55 | 22.0 | 1.81 |
| Developmentally Disabled Residents | 0.0 | 0.6 | 0.00 | 0.9 | 0.00 | 1.2 | 0.00 | 7.6 | 0.00 |
| Mentally Ill Residents | 47.0 | 37.4 | 1.26 | 33.8 | 1.39 | 37.4 | 1.26 | 33.8 | 1.39 |
| General Medical Service Residents | 14.5 | 21.4 | 0.68 | 18.3 | 0.79 | 21.2 | 0.68 | 19.4 | 0.74 |
| Impaired ADL (Mean) | 53.5 | 51.7 | 1.03 | 48.1 | 1.11 | 49.6 | 1.08 | 49.3 | 1.09 |
| Psychological Problems | 62.7 | 52.8 | 1.19 | 51.0 | 1.23 | 54.1 | 1.16 | 51.9 | 1.21 |
| Nursing Care Required (Mean) | 4.5 | 6.4 | 0.71 | 6.0 | 0.75 | 6.5 | 0.69 | 7.3 | 0.62 |